



HEADQUARTERS
COMBINED JOINT TASK FORCE SEVEN
BAGHDAD, IRAQ
APO AE 09342

REPLY TO
ATTENTION
OF:

CJTF7-SU

29 December 2003

MEMORANDUM FOR See Distribution

SUBJECT: CJTF-7 Policy on Malaria Prevention

1. References.

a. USCINCCENT Individual Protection and Individual, Unit Deployment Policy, Reference B, Appendix 6 To Annex Q to CDRUSCENTCOM OPLAN 1003v-change1(u), Force Health Protection.

b. Armed Forces Medical Intelligence Center infectious disease risk assessment for Iraq at www.afmic.dia.smil.mil/intel/afmic/iz/irqdis.htm (SIPRNET).

c. CENTCOM FRAGO Subject: USCENTCOM Guidance for Implementation of Area-Specific Malaria Chemoprophylactic Strategies ISO OEF and OIF.

d. Appendix C, Field Sanitation Team Materials, FM 4-25.12, Unit Field Sanitation Team.

2. PURPOSE: Establish CJTF-7 policy for malaria prevention.

3. APPLICABILITY: All military and civilian personnel under the operational control of CJTF-7.

4. BACKGROUND: Malaria is a preventable infectious parasitic disease spread by mosquitoes. Prevention of malaria can be achieved through use of area preventive measures (mosquito suppression spraying), personal protective measures, and, in areas where the threat of contracting malaria is high, malaria chemoprophylactic medication. The risk of contracting malaria in Iraq is considered to be low; however, local transmission foci do occur.

5. POLICY AND PROCEDURES:

a. U.S. personnel in Iraq will not take malaria chemoprophylactic medication. Coalition personnel will comply with their national policies.

b. Commanders will stress personal protective measures against malaria for all soldiers. These measures include the application of DEET to exposed skin, treating uniforms with permethrin, and sleeping under a permethrin treated bed net. These items are available through the U.S. military supply system.

c. Field sanitation teams should be properly trained and equipped IAW reference D to assist the unit command in ensuring that soldiers have access to the equipment and training necessary to effectively implement personal protective measures.

d. Preventive medicine personnel will engage in mosquito surveillance and suppression. Preventive medicine personnel should test pools of *Anopheles* mosquitoes for malaria using VecTest. Positive pools should be reported to the CJTF-7 Preventive Medicine Officer.

e. If the threat of contracting malaria in area of Iraq increases, the CJTF-7 Surgeon will re-evaluate the malaria policy. CJTF-7 will maintain a supply of doxycycline for use as a contingency prophylaxis. The MEDLOG BN will maintain a contingency stock of 36,000 30-days bottles of Doxycycline.

f. The approval authority for instituting contingency prophylaxis remains with the CJTF-7 Surgeon for U.S. forces and with the national command in consultation with the CJTF-7 Surgeon for coalition forces. Requests to initiate chemoprophylaxis should be forwarded to the CJTF-7 Surgeon through the CJTF-7 Preventive Medicine Officer.

6. The point of contact is the CJTF-7 Preventive Medicine Officer (DNVT 302-559-1941 or DSN 318-822-1639).

//Original Signed//
DONALD A. GAGLIANO
COL, MC
CJTF-7 Surgeon